Best Available Copy



PATENT APPLICATION FEE DETERMINATION R

			Substitut	e.tor.Form.PTO	-875	_	_				·	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	FOR	NUMBER	NUMBER FILED NUMBE		REXTRA		RATE	FEE		RATE	FEE	
BASK D7 C	FEE FR 1,16(a))							s	OR		s]
TOTA	I CLAIMS FR 1.16(c))		mbus 20				x \$=		OR	x s=]
INDE	PENDENT CLAIM FR 1.15(b))	S	minus 3 = ·				x s=		OR	x s=		1
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+5 =		OR	+5 =		1
							TOTAL		OR	TOTAL		1
* If the difference in column 1 is less than zero, enter **O* in column 2.							101.2			TOTAL		1
CLAIMS AS AMENDED - PART II										OTHER	R THAN	
	1 1	(Column 1)		(Column 2) (Column 3)			SMALL E	NTITY	OR	SMALL		
MENDMENT A	4/28/6	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE].
N N	Total (D' CFR 1.16(c))	· 10	Minus	" 20);		x s=		OR	x \$=]
R	Independent (37 CFR 1.16(b))	' /	Minus	3			x \$=		OR	× \$=]_
ΑM	FIRST PRESENT	ATION OF MULTIPU	E DEPENDI	ENT CLANS (37 CF	R 1.16(d))		+5	. ***.: *_ ::	OR-			.]
-	10017120011					j	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		1
							ADDCFEE	L	7)	2001766		1
-		(Column 1) CLAMS	1	(Column 2) H:GHEST	(Calumn 3)	1			√		1	7
ENDMENT B	1/2/11/15	HEWAINING -		NUMBER PREVIOUSLY	PRESENT EXTRA,	┝	RATE	T:ORAL	 	RATE	ADD:-	+-
	10110	ALIENDINENT	1172.2	PAID FOR	-	-		FEE	-		FEE	-
	Colora and or	10	Alinus	20		1	X 5 =	! /	0%	Х =		
N U N	(or CHR 1 (right)	3	tanos	3	<u> </u>		x 5 =	<u> </u>	OR	x = _ =		
AM	FIRST PRESENTATION OF LILLTIPLE DEPENDENT CLAM (37 CFR V 6(d))						+ s =		OR	+/s=	<u> </u>	╛
	·			•	7		TOTAL ADD'L FEE	V	or	TOTAL ADO'L FEE		
	•	· · · (Column 1)	•	(Column 2)	(Column 3)		,	/				7
FNDMENT C		CLAMS REMARKS AFTER AMENDMENT		HIGHEST RUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDS FORAL FEE		RATE	ADO» TIONAL 288	
	Total (37 CFR 1.14(d))	•	Minus	1"	-	٦	x s•		OŘ	x s	·	
	Independent (IX CFR 1,14(e))	· -	Minus		:	1	x s=		OR	x \$ =		\neg
AME	FIRST PRESENTATION OF LEALISTLE DEPENDENT CLAM (37 CFR 1,1940))						+ 4 4 6		08	1 5 5		7
TOTAL									┥ ¨-	TOTAL		-
-							ADD'L FEE	L	J ok	- AOD't FEE		\dashv

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.